

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American College of Cardiology Political Action Committee

ADDRESS (number and street)

2400 N St NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20037-1153

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00375360

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
10 18 2012

through

M M M / D D D / Y Y Y Y Y Y
11 26 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Carlton G. Davids

Signature of Treasurer

Carlton G. Davids

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
12 06 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 18 / 2012 To: M M / D D / Y Y Y Y Y Y
11 / 26 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		46353.91
(b) Cash on Hand at Beginning of Reporting Period.....	57075.88	
(c) Total Receipts (from Line 19)	41431.00	477393.85
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	98506.88	523747.76
7. Total Disbursements (from Line 31)	54268.73	479509.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	44238.15	44238.15
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	1	2

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	35078.67	391786.65
(ii) Unitemized	4583.60	65382.18
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	39662.27	457168.83
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	39662.27	457168.83
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	1768.73	19725.02
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ►	41431.00	477393.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	41431.00	477393.85

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1768.73	19551.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1768.73	19551.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	52500.00	457000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2958.33
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2958.33
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	54268.73	479509.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54268.73	479509.61

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	39662.27	457168.83
34. Total Contribution Refunds (from Line 28(d))	0.00	2958.33
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39662.27	454210.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1768.73	19551.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1768.73	19725.02
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	-173.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jesse E. Adams III, M.D.,

Mailing Address 1205 Isleworth Dr
 Ste 400

City State Zip Code
 Louisville KY 40245-5221

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Medical Center Cardiologists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.36

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2012

Transaction ID : 401E8459C4CA85C8301F

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

B. Michael B. Adesman M.D., F.A.

Mailing Address 400 Woodward Rd

City State Zip Code
 Media PA 19063-4227

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2012

Transaction ID : 96F5AC122ACC8A98DE5

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

c. Jay H. Alexander M.D., F.A.

Mailing Address 2256 Carlyle Ct

City State Zip Code
 Buffalo Grove IL 60089-4695

FEC ID number of contributing
 federal political committee.

C

Name of Employer

North Shore Cardiologists, SC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 30 2012

Transaction ID : 4AD38208FB6146514172

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

641.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rene J. Alvarez Jr., M.D.,

Mailing Address 425 McKean Dr

City

Wexford

State

PA

Zip Code

15090-7327

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Pittsburgh Medical Cente

Occupation

HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

10 / 21 / 2012

Transaction ID : 4EE6B47AAA237654CDBC

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Rene J. Alvarez Jr., M.D.,

Mailing Address 425 McKean Dr

City

Wexford

State

PA

Zip Code

15090-7327

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Pittsburgh Medical Cente

Occupation

HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 21 / 2012

Transaction ID : 433AB465A337F747FBC3

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Juan M. Aranda Jr., M.D.,

Mailing Address 356 Turkey Crk

City

Alachua

State

FL

Zip Code

32615-9367

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shands at the University of Florida

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 21 / 2012

Transaction ID : 4B6CA7867AE2C595D59F

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

416.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 8 OF 67
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas E. Arend Jr., COO

Mailing Address 2400 N St NW

City

Washington

State

DC

Zip Code

20037-1153

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

Executive

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : 48F89718342F59F24125

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Thomas E. Arend Jr., COO

Mailing Address 2400 N St NW

City

Washington

State

DC

Zip Code

20037-1153

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

Executive

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2012

Transaction ID : 4F17B1E77DF15CD31C34

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Robert W. Armbruster M.D., F.A.

Mailing Address 7330 Stafford Dr

City

Council Blfs

State

IA

Zip Code

51503-6008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Iowa Heart Center, PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2012

Transaction ID : 38EFC554DB1D90CE916

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

865.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Seth H. Baker D.O., F.A.

Mailing Address 787 37th St
 Ste E140

City State Zip Code
 Vero Beach FL 32960-7314

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2012

Transaction ID : 4B7723CF-16EE-43F7-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Eric R. Bates M.D., F.A.

Mailing Address 840 Cherrystone Ct

City State Zip Code
 Ann Arbor MI 48105-3038

FEC ID number of contributing
 federal political committee.

C

Name of Employer

University of Michigan Hospitals and H

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2012

Transaction ID : 4E8E927CF0D5767C5D81

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Jonathan J. Berry M.D., F.A.

Mailing Address 1331 N Elm St
 Ste 200

City State Zip Code
 Greensboro NC 27401-6304

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Southeastern Heart & Vascular Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : 229E95075C39FAB5198

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

833.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kathleen Blake M.D., F.A.

Mailing Address 15 Charles Plz
Apt 1402

City State Zip Code
Baltimore MD 21201-3941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 13 / 2012

Transaction ID : 4F5E9655520B2C5D230

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. William J. Bommer M.D., F.A.

Mailing Address 4860 Y St
Ste 2820

City State Zip Code
Sacramento CA 95817-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer

UC Davis, Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2012

Transaction ID : 4BDE96F74C29A5C11045

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

c. William J. Bommer M.D., F.A.

Mailing Address 4860 Y St
Ste 2820

City State Zip Code
Sacramento CA 95817-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer

UC Davis, Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2012

Transaction ID : 40BD8ED22DF2C3CD8CE5

Amount of Each Receipt this Period

20.84

SUBTOTAL of Receipts This Page (optional)..... ►

125.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael N. Boriss D.O., F.A.

Mailing Address 1002 Willets Rd
Ste 108

City State Zip Code
Marmora NJ 08223-1001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regional Heart and Lung Associates

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2012

Transaction ID : D50BDC05082119687D5

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Alfred A. Bove M.D., Ph.D

Mailing Address 110 Anton Rd

City State Zip Code
Wynnewood PA 19096-1226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Temple University Hospital

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2012

Transaction ID : 4853932F02BABE4757EF

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Ralph G. Brindis M.D., M.P.

Mailing Address 1410 Monterey Blvd

City State Zip Code
San Francisco CA 94127-2554

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kaiser Foundation Hospital

Occupation
INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2012

Transaction ID : 4756B589E68A21D288E8

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

683.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alan S. Brown M.D., F.A.

Mailing Address 1912 Alta Vista Ct

City

Naperville

State

IL

Zip Code

60563-1815

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midwest Heart SpecialistsEdward Heart

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2012

Transaction ID : 45DEB7D1CDEFDE9DD171

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Joseph G. Cacchione M.D., F.A.

Mailing Address 5740 Hickory Knoll Ct

City

Fairview

State

PA

Zip Code

16415-3246

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cleveland Clinic Foundation

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

916.74

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 21 / 2012

Transaction ID : 44A190CEEAEF7781F2AE

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Joseph G. Cacchione M.D., F.A.

Mailing Address 5740 Hickory Knoll Ct

City

Fairview

State

PA

Zip Code

16415-3246

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cleveland Clinic Foundation

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

916.74

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 21 / 2012

Transaction ID : 41DB967068420F96FB27

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

266.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert M. Campbell M.D., F.A.

Mailing Address 2835 Brandywine Rd
Ste 300

City State Zip Code
Atlanta GA 30341-5540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sibley Heart Center Cardiology Emory U

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 23 / 2012

Transaction ID : 7BCF4AC7-DE38-481D-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Peter J. Chaille M.D., F.A.

Mailing Address 427 Chestnut Forest Cv

City State Zip Code
Fort Wayne IN 46814-8926

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2012

Transaction ID : 49D9BDE09D995794E81F

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

c. Hollace D. Chastain II, M.D.,

Mailing Address 1819 Braemar Dr

City State Zip Code
Fort Wayne IN 46814-9364

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fort Wayne Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2012

Transaction ID : 4AF8B5A86BE2D1DEDA14

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

641.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 67
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard A. Chazal M.D., F.A.

Mailing Address 671 N Town and River Dr

City

Fort Myers

State

FL

Zip Code

33919-5931

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Heart Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

833.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2012

Transaction ID : 42CE9169A6EDA32A9007

Amount of Each Receipt this Period

833.30

Full Name (Last, First, Middle Initial)

B. Russell A. Cifone M.D., F.A.

Mailing Address 66 Highridge Rd

City

West Simsbury

State

CT

Zip Code

06092-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central Connecticut Cardiologists, LLC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : FC38D82884457D5CCC3

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Bernard A. Clark III, M.D.,

Mailing Address 95 Johnny Cake Ln

City

Glastonbury

State

CT

Zip Code

06033-2545

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Francis Hospital and Medical Cente

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2012

Transaction ID : 4BF9B23762610D7C557B

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

633.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 67
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lianna S. Collinge, Cae CAE, Unkno

Mailing Address 4014 88th Ave NW

City

Gig Harbor

State

WA

Zip Code

98335-6157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Washington Chapter of the ACC

Occupation

ADMINISTRATION

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

988.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2012			

Transaction ID : 4CD783B8897D09E45C54

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

B. Frederick V. Crall Jr., M.D.,Mailing Address 2450 Kipling Ave
Ste G01

City

Cincinnati

State

OH

Zip Code

45239-6699

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Medical Associates - Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2012			

Transaction ID : 2D8CE8AF-4F98-428C-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. George H. Crossley III, M.D.,

Mailing Address 276 Stratton Pl

City

Brentwood

State

TN

Zip Code

37027-4228

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Thomas Heart

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2012			

Transaction ID : 4849A115851286DCE341

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

590.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas C. Dickinson M.D., F.A.

Mailing Address 1415 Magna Ct

City State Zip Code
Orlando FL 32804-8048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : 385FF6783B5A06BE0B6

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Richard A. Dickstein M.D., F.A.

Mailing Address 15 Slab Branch Rd

City State Zip Code
Medford NJ 08055-8186

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : 76A8DBCA8392C0B7D8D

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

c. James T. Dodge Jr., M.D.,

Mailing Address 445 Lombard Ln

City State Zip Code
Wenatchee WA 98801-9604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wenatchee Valley Medical Center

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2012

Transaction ID : 99F0B324-8D7D-418F-

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 67

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. James T. Elliott M.D., F.A.Mailing Address 1605 E Broadway
Ste 300

City	State	Zip Code
Columbia	MO	65201-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Missouri Heart CenterOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : E23394DA-305B-4728-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Blair D. Erb Jr., M.D.,Mailing Address 905 Highland Blvd
Ste 4330

City	State	Zip Code
Bozeman	MT	59715-6901

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiology Consultants, P.A.Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : 4E8FB830FCF3976DFE4B

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Richard Ericson M.D., F.A.

Mailing Address 2712 Lake Front Ct

City	State	Zip Code
Modesto	CA	95355-2262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Valley Heart Assoc. Medical GroupOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2012

Transaction ID : 4181AC63C779C0E229F7

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

1100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 67

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard Ericson M.D., F.A.

Mailing Address 2712 Lake Front Ct

City

Modesto

State

CA

Zip Code

95355-2262

FEC ID number of contributing
federal political committee.

C

Name of Employer

Valley Heart Assoc. Medical Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

11 / 09 / 2012

Transaction ID : 49A6BCC67344C691BC0F

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Richard Ericson M.D., F.A.

Mailing Address 2712 Lake Front Ct

City

Modesto

State

CA

Zip Code

95355-2262

FEC ID number of contributing
federal political committee.

C

Name of Employer

Valley Heart Assoc. Medical Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

11 / 21 / 2012

Transaction ID : 45EEACF0A0B427D65470

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

c. John Murray Estess Jr., M.D.,

Mailing Address 1754 Sunflower Cir

City

Tupelo

State

MS

Zip Code

38801-8193

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Associates of North Mississ

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

10 / 31 / 2012

Transaction ID : 8CE6CFE73A151303441

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. David M. Evans M.D., F.A.

Mailing Address 130 Ashlei Ln

City

Searcy

State

AR

Zip Code

72143-3024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Clinic Arkansas

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 09 / 2012

Transaction ID : 413CBD1B49F81C04F40F

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Chester J. Falterman M.D., F.A.

Mailing Address 1458 Avellino Cir

City

Murfreesboro

State

TN

Zip Code

37130-7608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1716.63

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : 465DB92D82E800CC36DE

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. Chester J. Falterman M.D., F.A.

Mailing Address 1458 Avellino Cir

City

Murfreesboro

State

TN

Zip Code

37130-7608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1716.63

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 15 / 2012

Transaction ID : 4BE68BDCF69493BF36DA

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)..... ►

263.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Chester J. Falterman M.D., F.A.

Mailing Address 1458 Avellino Cir

City

Murfreesboro

State

TN

Zip Code

37130-7608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1716.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2012

Transaction ID : 47D790AC3A42429A4E22

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. James W. Fasules M.D., F.A.

Mailing Address 2718 Stephenson Ln NW

City

Washington

State

DC

Zip Code

20015-1504

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1833.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2012

Transaction ID : 443F99DA48D7B85834F8

Amount of Each Receipt this Period

166.67

Full Name (Last, First, Middle Initial)

C. Kevin Fitzpatrick PA-C

Mailing Address 2400 N St NW

City

Washington

State

DC

Zip Code

20037-1153

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

ADMINISTRATION

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

916.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2012

Transaction ID : 4114852B0C649DB9D551

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

333.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kevin Fitzpatrick PA-C

Mailing Address 2400 N St NW

Heart House

City

Washington

State

DC

Zip Code

20037-1153

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

ADMINISTRATION

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.69

Date of Receipt

11 / 18 / 2012

Transaction ID : 4BF68C32F656DC6C465D

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Ned D. Freeman M.D., F.A.

Mailing Address 2 Innovation Dr

Ste 400

City

Greenville

State

SC

Zip Code

29607-5270

FEC ID number of contributing
federal political committee.

C

Name of Employer

Upstate Cardiology, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 26 / 2012

Transaction ID : D1BD090E-A85B-4990-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Lance B. Friedland M.D., F.A.

Mailing Address 1010 Chesson Ct

City

Alpharetta

State

GA

Zip Code

30022-7174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Group P.C.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 26 / 2012

Transaction ID : 5EAFBD68250F0D751C6

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1333.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 67
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gordon L. Fung M.D., F.A.Mailing Address 1837 10th Ave
1609

City	State	Zip Code
San Francisco	CA	94122-4601

FEC ID number of contributing
federal political committee.

C

Name of Employer
UCSF Medical Center at Mt. ZionOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2012

Transaction ID : 47C9AFD03FA729835138

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Cathy Gates

Mailing Address 17500 Ashton Forest Ter

City	State	Zip Code
Sandy Spring	MD	20860-3009

FEC ID number of contributing
federal political committee.

C

Name of Employer
American College of CardiologyOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2012

Transaction ID : 4436AFC271CD6C11CCBF

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Cathy Gates

Mailing Address 17500 Ashton Forest Ter

City	State	Zip Code
Sandy Spring	MD	20860-3009

FEC ID number of contributing
federal political committee.

C

Name of Employer
American College of CardiologyOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	18	/	2012

Transaction ID : 4A848A0ECC747B73F529

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

583.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 67
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Linda D. Gillam M.D., F.A.

Mailing Address 55 Old Farm Rd

City

Hamden

State

CT

Zip Code

06517-1615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Morristown Medical Center

Occupation

ECHOCARDIOLOGY/ECHOCARDIOGRAPHY

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2012

Transaction ID : B6D841857EBF698D2B8

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Michael F. Gilson M.D., F.A.

Mailing Address 100 Prospect St

City

Providence

State

RI

Zip Code

02906-1446

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2012

Transaction ID : 43E79C51DF8E3D4E6F64

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Samuel D. Goldberg M.D., F.A.

Mailing Address 8512 Atwell Rd

City

Potomac

State

MD

Zip Code

20854-6234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maryland Heart, P.C.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2012

Transaction ID : 4D4697683F656DD10CF5

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

1130.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 67

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lee W. Gould M.D., F.A.

Mailing Address 3865 Country Club Dr

City

Lewiston

State

ID

Zip Code

83501-9622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

10 / 21 / 2012

Transaction ID : 4989B8F20BECC1733AA8

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Lee W. Gould M.D., F.A.

Mailing Address 3865 Country Club Dr

City

Lewiston

State

ID

Zip Code

83501-9622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 21 / 2012

Transaction ID : 4B439A200FEADD10C836

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Dale A. Hansen M.D., F.A.

Mailing Address 5421 S 61st Court

City

Lincoln

State

NE

Zip Code

68516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bryan LGH Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

10 / 18 / 2012

Transaction ID : 4AEEB0CA1DADD15FBAF4

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

416.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 67

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dale A. Hansen M.D., F.A.

Mailing Address 5421 S 61st Court

City
Lincoln

State
NE

Zip Code
68516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bryan LGH Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

11 / 18 / 2012

Transaction ID : 4DEABE7916DD1AED0E3E

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Maurice D. Harris M.D., F.A.

Mailing Address 2801 N Decatur Rd
Ste 295

City
Decatur

State
GA

Zip Code
30033-5936

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emory Heart & Vascular

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 31 / 2012

Transaction ID : 15829C0FE3C5D2B1BAA

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Jerome L. Hines M.D., Ph.D

Mailing Address 11 Salt Creek Ln
Ste 2

City
Hinsdale

State
IL

Zip Code
60521-3032

FEC ID number of contributing
federal political committee.

C

Name of Employer

Illinois Heart & Vascular

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

10 / 21 / 2012

Transaction ID : 45E58F93ED1D784899EE

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

833.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 OF 67

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jerome L. Hines M.D., Ph.D

Mailing Address 11 Salt Creek Ln
Ste 2

City Hinsdale State IL Zip Code 60521-3032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Illinois Heart & Vascular

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 21 / 2012

Transaction ID : 484AA0AFB72CDA68E2AE

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Robert E. Hobbs M.D., F.A.

Mailing Address 2713 Dryden Rd

City Shaker Heights State OH Zip Code 44122-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cleveland Clinic

Occupation
HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

10 / 21 / 2012

Transaction ID : 415AB4A8B7E7312DFBE1

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Robert E. Hobbs M.D., F.A.

Mailing Address 2713 Dryden Rd

City Shaker Heights State OH Zip Code 44122-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cleveland Clinic

Occupation
HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 21 / 2012

Transaction ID : 4F8AA352F0EA2FABD90F

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

250.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robin A. Horn M.D., F.A.

Mailing Address 3521 Silverside Rd
Ste 1C

City State Zip Code
Wilmington DE 19810-4900

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiology Consultants

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 18 / 2012

Transaction ID : BCE2CE06-B383-4E52-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Daniel J. Humiston M.D., F.A.

Mailing Address 1928 Maple Hollow Way

City State Zip Code
Bountiful UT 84010-1041

FEC ID number of contributing
federal political committee.

C

Name of Employer
Utah Cardiology, PC

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

10 / 21 / 2012

Transaction ID : 4E2399BDED0B5067F53C

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Daniel J. Humiston M.D., F.A.

Mailing Address 1928 Maple Hollow Way

City State Zip Code
Bountiful UT 84010-1041

FEC ID number of contributing
federal political committee.

C

Name of Employer
Utah Cardiology, PC

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

11 / 21 / 2012

Transaction ID : 47A48B0E518673627F05

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 OF 67

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Anand M. Irimpen M.B.B.S.,

Mailing Address 243 Hollywood Dr

City

Metairie

State

LA

Zip Code

70005-3919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tulane UniversityTulane Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 31 / 2012

Transaction ID : 84AF3D77E660A9368BA

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Pamela A. Ivey M.D., F.A.

Mailing Address 52 Quail Run Rd

City

Henderson

State

NV

Zip Code

89014-2148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Consultants of Nevada

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2310.00

Date of Receipt

10 / 21 / 2012

Transaction ID : 45D9B849133DC1C32243

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

c. Pamela A. Ivey M.D., F.A.

Mailing Address 52 Quail Run Rd

City

Henderson

State

NV

Zip Code

89014-2148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Consultants of Nevada

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2310.00

Date of Receipt

11 / 21 / 2012

Transaction ID : 41B1A29ACD755B56B233

Amount of Each Receipt this Period

210.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

670.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 67
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. C. David Joffe M.D., F.A.

Mailing Address 7067 Meeker Commons Ln

City	State	Zip Code
Dayton	OH	45414-2065

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dayton Heart Center, Inc.

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : 491A975F4EECC0FE7030

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Steven D. Johnson M.D., F.A.

Mailing Address 500 W Royal Tower Dr

City	State	Zip Code
Irmo	SC	29063-2278

FEC ID number of contributing
federal political committee.

C

Name of Employer

Upstate Cardiology, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : 8EF685A1C6711FBEC24

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. John M. Johnstone M.D., F.A.

Mailing Address 819 W Main St

City	State	Zip Code
Richmond	KY	40475-1114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : 4B2DB3B129080F2F6F3B

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

325.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John M. Johnstone M.D., F.A.

Mailing Address 819 W Main St

City

Richmond

State

KY

Zip Code

40475-1114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 24 / 2012

Transaction ID : 40F89C1DD72CBBAF9176

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. George P. Kinzfohl III, M.D.,

Mailing Address 33 Lettery Cir

City

Sudbury

State

MA

Zip Code

01776-7400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Center of MetroWest

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOI

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

229.13

Date of Receipt

10 / 19 / 2012

Transaction ID : 4407B948D05DEDC425AA

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

c. George P. Kinzfohl III, M.D.,

Mailing Address 33 Lettery Cir

99 Lincoln Street

City

Sudbury

State

MA

Zip Code

01776-7400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Center of MetroWest

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOI

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

229.13

Date of Receipt

11 / 19 / 2012

Transaction ID : 427D8C5266A9350178A1

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional)..... ►

66.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. James J. Kmetzo M.D., F.A.

Mailing Address 4604 Smith Rd

City State Zip Code
Furlong PA 18925-1386

FEC ID number of contributing
federal political committee.

C

Name of Employer
Central Bucks Cardiology

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 21 / 2012

Transaction ID : 3D3F68DE3C93688A8B7

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Steven E. Kornberg M.D., F.A.

Mailing Address 10 E New York Ave
Ste 2

City State Zip Code
Somers Point NJ 08244-2367

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shore Heart Consultants, LLC

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

10 / 18 / 2012

Transaction ID : 43ED8CACCA95B93DA4E4

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

c. Steven E. Kornberg M.D., F.A.

Mailing Address 10 E New York Ave
Ste 2

City State Zip Code
Somers Point NJ 08244-2367

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shore Heart Consultants, LLC

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

11 / 18 / 2012

Transaction ID : 4CCA8D2F46EBE278283E

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional)..... ►

333.32

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 32 OF 67
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gilead I. Lancaster M.D., F.A.

Mailing Address 15 Mine Hill Rd

City

Redding

State

CT

Zip Code

06896-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bridgeport Hospital Dept of Echo

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2012

Transaction ID : 40F18CE4A1A0B9410ED9

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Gilead I. Lancaster M.D., F.A.

Mailing Address 15 Mine Hill Rd

City

Redding

State

CT

Zip Code

06896-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bridgeport Hospital Dept of Echo

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2012

Transaction ID : 4C5DAA92F375538DC24E

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. William J. Lauer M.D., F.A.

Mailing Address 1665 Sturbridge Dr

City

Sewickley

State

PA

Zip Code

15143-8514

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2012

Transaction ID : F045ECB983BB32A2DCB

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

450.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joseph R. Lee M.D., F.A.

Mailing Address 2990 Electra Dr

City State Zip Code
Colorado Springs CO 80906-1073

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 31 2012

Transaction ID : 70BE9D0F3900EA453B9

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Thomas J. Lewandowski M.D., F.A.

Mailing Address 113 Limekiln Dr

City State Zip Code
Neenah WI 54956-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Appleton Cardiology ThedaCare

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 21 2012

Transaction ID : 411B9417C7FBB678CACA

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Thomas J. Lewandowski M.D., F.A.

Mailing Address 113 Limekiln Dr

City State Zip Code
Neenah WI 54956-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Appleton Cardiology ThedaCare

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 21 2012

Transaction ID : 4E93BA3DA24F76EB811A

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 67
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sandra J. Lewis M.D., F.A.

Mailing Address 5342 SW Hewett Blvd

City	State	Zip Code
Portland	OR	97221-2254

FEC ID number of contributing
federal political committee.

C

Name of Employer

NW Cardiovascular Institute

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : 45DBBFBD82D42B98348E

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. William R. Lewis M.D., F.A.

Mailing Address 24707 Tricia Dr

City	State	Zip Code
Westlake	OH	44145-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Metro Health Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : 4791B6D29342F59D9F51

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

C. James Richard Mason M.D., F.A.

Mailing Address 700 Ruskin Dr

City	State	Zip Code
Elk Grove Village	IL	60007-3359

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Associates SC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : 794E62DF7CA401898B0

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

493.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 OF 67

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gloria J. Mays M.D., F.A.

Mailing Address 1111 Park Pl

City

College Station

State

TX

Zip Code

77840-3090

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 22 / 2012

Transaction ID : A53CF31E6A84C2D6875

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Albert B. Mercer M.D., F.A.

Mailing Address 1120 Griffith Ave

City

Owensboro

State

KY

Zip Code

42301-2812

FEC ID number of contributing
federal political committee.

C

Name of Employer

Green River Heart Institute

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 19 / 2012

Transaction ID : 471991D1DE3B32532779

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Paul J. Micale M.D., F.A.

Mailing Address 178 Point Heron Dr

City

Newport News

State

VA

Zip Code

23606-1415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hampton Roads Cardiovascular Assocs

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 21 / 2012

Transaction ID : 118B7E0374203D3E072

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eugenia M. Miller M.D., F.A.

Mailing Address 116 Blue Sky Dr

City State Zip Code
Durango CO 81301-7146

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : CCAF5AFD8129D62A76D

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Margo B. Minissian ACNP-BC, M

Mailing Address 444 S San Vicente Blvd
Ste 600

City State Zip Code
Los Angeles CA 90048-4174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cedars Sinai Heart Institute Womens He

Occupation

PREVENTIVE CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2012

Transaction ID : 4AC3BCEB54B658DAFC21

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

c. Marc A. Mugmon M.D., F.A.

Mailing Address 7193 Collingwood Ct

City State Zip Code
Elkridge MD 21075-5548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chesapeake CardioVascular Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2012

Transaction ID : 45168B7825F24FCA341B

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

656.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Parirokh Nozad M.D., F.A.

Mailing Address 2513 E 12th St

City

Brooklyn

State

NY

Zip Code

11235-5007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

730.00

Date of Receipt

10 / 31 / 2012

Transaction ID : 9C8870B86BBBA55738B

Amount of Each Receipt this Period

730.00

Full Name (Last, First, Middle Initial)

B. Charles D. O'Shaughnessy M.D., F.A.

Mailing Address 32411 Nottingham Dr

City

Avon Lake

State

OH

Zip Code

44012-2192

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Ohio Heart Center

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 22 / 2012

Transaction ID : 09DE1EC5D37149FFB53

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Alice A. Passer M.D., F.A.

Mailing Address 12 Meloon Rd

City

Greenland

State

NH

Zip Code

03840-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Exeter Cardiovascular Associates, PLLC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 26 / 2012

Transaction ID : 5FF27C20D25DFE6A8E8

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2230.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 OF 67

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hemantkumar M. Patel M.D., F.A.

Mailing Address 2314 Tattersalls Dr

City
Wilmington

State
NC

Zip Code
28403-8017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wilmington Cardiology, PLLC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 31 / 2012

Transaction ID : F224039E01C2D28CA2E

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Kathleen A. Pavaglio M.D., F.A.

Mailing Address 3230 Waring Ct
Ste 0

City
Oceanside

State
CA

Zip Code
92056-4509

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 22 / 2012

Transaction ID : C512A57746A1C5DA604

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Vaughn W. Payne M.D., F.A.

Mailing Address 145 Hager Ln

City
Staffordsville

State
KY

Zip Code
41256-9144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kentucky Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

10 / 29 / 2012

Transaction ID : 490DB4CB890E3BD81B86

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

833.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John W. Pickrell M.D., F.A.

Mailing Address 1909 Elkhorn Valley Dr

City State Zip Code
Casper WY 82609-4620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wyoming CardioPulmonary

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 18 2012

Transaction ID : 4643B04287B81A69F77F

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. John W. Pickrell M.D., F.A.

Mailing Address 1909 Elkhorn Valley Dr

City State Zip Code
Casper WY 82609-4620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wyoming CardioPulmonary

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 18 2012

Transaction ID : 4832A50EFF65471CF330

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

c. David J. Pinnelas M.D., F.A.

Mailing Address 2 Hopi Ct

City State Zip Code
Manalapan NJ 07726-4628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shore Heart Group

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 09 2012

Transaction ID : 4F3B80C54F3985720A8E

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)..... ►

240.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 40 OF 67
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Arthur H. Popkave II, M.D.,

Mailing Address 1000 Coventry Dr

City

Phillipsburg

State

NJ

Zip Code

08865-1980

FEC ID number of contributing
federal political committee.

C

Name of Employer

Two Rivers Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2012

Transaction ID : 0C11FD98E42E20D5232

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. James B. Powers M.D., F.A.

Mailing Address 11 Bowdoin Dr

City

Falmouth

State

ME

Zip Code

04105-2557

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maine Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2012

Transaction ID : 48B4AB87FEE206977E4C

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Subha V. Raman M.D., F.A.

Mailing Address 473 W 12th Ave

Rm 200

City

Columbus

State

OH

Zip Code

43210-1252

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio State University Davis Heart and L

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : E2D8520A-25A5-410F-

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

850.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 41 OF 67
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Paul Reiter M.D., F.A.

Mailing Address PO Box 269

City	State	Zip Code
Hurley	NY	12443-0269

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2012

Transaction ID : C8165977F5BB725BBB5

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. David R. Richards D.O., F.A.Mailing Address 3705 Olentangy River Rd
Ste 100

City	State	Zip Code
Columbus	OH	43214-3467

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Mid Ohio Cardiology

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2012

Transaction ID : 49C7E3E9-DB89-4B1B-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Michael E. Ring M.D., F.A.Mailing Address 122 W 7th Ave
Ste 450

City	State	Zip Code
Spokane	WA	99204-2339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Heart Clinics Northwest

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2012

Transaction ID : 41BFB30C3AD4C7D4B6F6

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

833.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael E. Ring M.D., F.A.

Mailing Address 122 W 7th Ave
Ste 450

City State Zip Code
Spokane WA 99204-2339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Clinics Northwest

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 21 / 2012

Transaction ID : 46B29FF64267364F5068

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. George P. Rodgers M.D., F.A.

Mailing Address 11673 Jollyville Rd
Ste 205-B

City State Zip Code
Austin TX 78759-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.39

Date of Receipt

10 / 23 / 2012

Transaction ID : 4DF3B852AC227556FE7C

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

c. George P. Rodgers M.D., F.A.

Mailing Address 11673 Jollyville Rd
Ste 205-B

City State Zip Code
Austin TX 78759-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.39

Date of Receipt

11 / 01 / 2012

Transaction ID : 40F290702FE6D5021AB7

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

250.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 43 OF 67
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. George P. Rodgers M.D., F.A.Mailing Address 11673 Jollyville Rd
Ste 205-B

City	State	Zip Code
Austin	TX	78759-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.39

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2012			

Transaction ID : 4DF3BD23A8B393ACAC53

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Felix J. Rogers D.O., F.A.Mailing Address 5400 Fort St
Ste 200

City	State	Zip Code
Trenton	MI	48183-4636

FEC ID number of contributing
federal political committee.

C

Name of Employer

Downriver Cardiology Consultants

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2012			

Transaction ID : 9A22B03C02C4097A459

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Michael F. Romanelli M.D., F.A.

Mailing Address 12 Lakeside Ct

City	State	Zip Code
Grosse Pointe	MI	48230-1906

FEC ID number of contributing
federal political committee.

C

Name of Employer

Woods Crdvsclr Pulmonary Assoc PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2012			

Transaction ID : EC58C99F46554F558E1

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

483.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. David A. Rosenbaum M.D., F.A.

Mailing Address 3625 Cherry Plum Dr

City State Zip Code
 Colorado Springs CO 80920-2826

FEC ID number of contributing federal political committee.

C

Name of Employer

Pikes Peak Cardiology

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

M M / D D / Y Y Y Y Y
 10 21 2012

Transaction ID : 487595D24006FE671545

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

B. David A. Rosenbaum M.D., F.A.

Mailing Address 3625 Cherry Plum Dr

City State Zip Code
 Colorado Springs CO 80920-2826

FEC ID number of contributing federal political committee.

C

Name of Employer

Pikes Peak Cardiology

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

M M / D D / Y Y Y Y Y
 11 21 2012

Transaction ID : 40A1946F2F17FC4FF10A

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

C. Howard S. Rosman M.D., F.A.

Mailing Address 2093 Fairway Dr

City State Zip Code
 Birmingham MI 48009-1869

FEC ID number of contributing federal political committee.

C

Name of Employer

St. John Hospital & Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2012

Transaction ID : A0AEC307EF1F7D19DBC

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1416.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 45 OF 67
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John S. Rumsfeld M.D., Ph.D

Mailing Address 250 S Dahlia St

City

Denver

State

CO

Zip Code

80246-1049

FEC ID number of contributing
federal political committee.

C

Name of Employer

Denver VA Medical Center, University o

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2012

Transaction ID : 4A7BAC0CC028A54BF612

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. John S. Rumsfeld M.D., Ph.D

Mailing Address 250 S Dahlia St

City

Denver

State

CO

Zip Code

80246-1049

FEC ID number of contributing
federal political committee.

C

Name of Employer

Denver VA Medical Center, University o

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2012

Transaction ID : 4F6784DE4B35877272B8

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

c. Barry D. Rutherford M.D., F.A.

Mailing Address 5811 Oakwood Rd

City

Mission Hills

State

KS

Zip Code

66208-1145

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Consultants, P.C.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2012

Transaction ID : D3C281840BFC0E1613E

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

466.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Paul D. Sarkaria M.D., F.A.

Mailing Address 3230 Waring Ct
Ste O

City State Zip Code
Oceanside CA 92056-4509

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2012

Transaction ID : C6C40F62DCE71234009

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Michael K. Schroyer RN, A.A.C.

Mailing Address 9065 Pebblepoint Cir

City State Zip Code
Zionsville IN 46077-8992

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saint Vincent Heart Center of Indiana

Occupation

ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

968.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : 4EFB863E5CB16C020316

Amount of Each Receipt this Period

88.00

Full Name (Last, First, Middle Initial)

C. Jawad Z. Shaikh M.B.B.S.

Mailing Address 18 Carriage Hills Road

City State Zip Code
San Antonio TX 78257

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 26 / 2012

Transaction ID : E65539CFE53BB8F938B

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

953.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 67

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Timothy J. Shanahan D.O., F.A.

Mailing Address 8714 Spur Ln

City

Easton

State

MD

Zip Code

21601-1202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chesapeake Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2012

Transaction ID : 42188C72D326D2596F22

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

B. Stanley J. Shin M.D., F.A.

Mailing Address 368 Northside Dr E

City

Statesboro

State

GA

Zip Code

30458-4839

FEC ID number of contributing
federal political committee.

C

Name of Employer

Statesboro Cardiology, P.C.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2012

Transaction ID : 2BC93F759D3AB6F5F91

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. John W. Shuck M.D., F.A.

Mailing Address 1100 Forrest Ave

City

Dover

State

DE

Zip Code

19904-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1584.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2012

Transaction ID : 431F8662BA9F1771A836

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

770.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John W. Shuck M.D., F.A.

Mailing Address 1100 Forrest Ave

City
Dover

State
DE

Zip Code
19904-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1584.00

Date of Receipt

11 / 26 / 2012

Transaction ID : 4C46AF23023B1C2C4DC5

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Steven E. Silver M.D., F.A.

Mailing Address 5 Walkaway Ln

City

Cherry Hill

State

NJ

Zip Code

08003-5136

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 21 / 2012

Transaction ID : 237293BA-1474-4123-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

c. Narendra Singh M.D., F.A.

Mailing Address 6350 Haddington Ln

City

Johns Creek

State

GA

Zip Code

30024-5304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Atlanta Heart Specialists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.66

Date of Receipt

11 / 09 / 2012

Transaction ID : 487B884ECF726585E537

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1600.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 49 OF 67
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. David L. Smith M.D., F.A.

Mailing Address 4765 Twinbrook Cir

City

Doylestown

State

PA

Zip Code

18902-1285

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central Bucks Specialists Ltd

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2012

Transaction ID : 3AB95BF453B20D11BE8

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Michael J. Springer M.D., F.A.

Mailing Address 803 Towner Pl

City

Louisville

State

KY

Zip Code

40223-2568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Cardiologists

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

458.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2012

Transaction ID : 4204B4E42CBF7383E9B6

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

c. Michael J. Springer M.D., F.A.

Mailing Address 803 Towner Pl

City

Louisville

State

KY

Zip Code

40223-2568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Cardiologists

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

458.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2012

Transaction ID : 40DCAFD027EC6E301286

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional)..... ►

333.32

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jesse W. St. Clair III, M.D.,

Mailing Address 1632 Cutty Sark Rd

City

Virginia Beach

State

VA

Zip Code

23454-1549

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 22 / 2012

Transaction ID : 5927B373087F05E2E54

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Raymond F. Stainback M.D., F.A.

Mailing Address 2111 University Blvd

City

Houston

State

TX

Zip Code

77030-1218

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hall-Garcia Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 26 / 2012

Transaction ID : BDBAF7485BB81DC2EC6

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Alan David Steljes M.D., F.A.

Mailing Address 2839 Saint Rose Pkwy
Ste 160

City

Henderson

State

NV

Zip Code

89052-4849

FEC ID number of contributing
federal political committee.

C

Name of Employer

Steljes Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 18 / 2012

Transaction ID : 102D83B4-A103-4CEF-

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard F. Terry M.D.

Mailing Address 8 Highland Park

City
Wheeling

State
WV

Zip Code
26003-5473

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 31 / 2012

Transaction ID : 5F9CEB06F9AE234341B

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Suma A. Thomas M.D., F.A.

Mailing Address 7620 Old Georgetown Rd
Apt 1214

City

Bethesda

State

MD

Zip Code

20814-6182

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1458.38

Date of Receipt

10 / 28 / 2012

Transaction ID : 418EB5DC9440BBF82AFC

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

C. Paul H. Tolerico M.D., F.A.

Mailing Address 41 Hudson Dr

City
York

State
PA

Zip Code

17402-8829

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiac Diagnostic Associates

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

11 / 26 / 2012

Transaction ID : 274FDADE050E3A61677

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

823.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 52 OF 67

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Krishnaswami Vijayaraghavan M.B.B.S.

Mailing Address 2817 E Ludlow Dr

City

Phoenix

State

AZ

Zip Code

85032-5665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

916.74

Date of Receipt

10 / 21 / 2012

Transaction ID : 48969A4FE7F9D651A27A

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Krishnaswami Vijayaraghavan M.B.B.S.

Mailing Address 2817 E Ludlow Dr

City

Phoenix

State

AZ

Zip Code

85032-5665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 21 / 2012

Transaction ID : 49B99052816E24C5146B

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Juan Villafane M.D., F.A.

Mailing Address 1400 Willow Ave
1205

City

Louisville

State

KY

Zip Code

40204-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

PEDIATRICS

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

833.40

Date of Receipt

11 / 01 / 2012

Transaction ID : 4AABA04FB072698CCF3A

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thad F. Waites M.D., F.A.

Mailing Address 1017 Richburg Rd

City

Hattiesburg

State

MS

Zip Code

39402-9055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southern Heart Center

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2416.74

Date of Receipt

10 / 21 / 2012

Transaction ID : 4979A28728AA19145013

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Thad F. Waites M.D., F.A.

Mailing Address 1017 Richburg Rd

City

Hattiesburg

State

MS

Zip Code

39402-9055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southern Heart Center

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2416.74

Date of Receipt

11 / 21 / 2012

Transaction ID : 45ADB36178AF47586B75

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Howard T. Walpole Jr., M.D.,

Mailing Address 31 Northumberland

City

Nashville

State

TN

Zip Code

37215-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.37

Date of Receipt

11 / 09 / 2012

Transaction ID : 4712AFD64896699B3CDA

Amount of Each Receipt this Period

416.67

SUBTOTAL of Receipts This Page (optional)..... ►

583.35

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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PAGE 54 OF 67

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mary Norine Walsh M.D., F.A.

Mailing Address 428 W 83rd Pl

City

Indianapolis

State

IN

Zip Code

46260-4905

FEC ID number of contributing
federal political committee.

C

Name of Employer

St Vincent Heart Center of Indiana

Occupation

HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 29 / 2012

Transaction ID : 45ABBC155F20B59C7D1D

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Bruce A. Watt M.D., F.A.

Mailing Address 2109 S Main Ave

City

Sioux Falls

State

SD

Zip Code

57105-3827

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Central Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

916.74

Date of Receipt

10 / 21 / 2012

Transaction ID : 467582B66D77E58C01B9

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Bruce A. Watt M.D., F.A.

Mailing Address 2109 S Main Ave

City

Sioux Falls

State

SD

Zip Code

57105-3827

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Central Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 21 / 2012

Transaction ID : 4EBABE6F5701A58B0718

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

266.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 67
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert C. Wesley Jr., M.D.,

Mailing Address 8841 Montagna Dr

City

Las Vegas

State

NV

Zip Code

89134-6148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

924.00

Date of Receipt

10 / 21 / 2012

Transaction ID : 41E889445A615F63D18E

Amount of Each Receipt this Period

84.00

Full Name (Last, First, Middle Initial)

B. Robert C. Wesley Jr., M.D.,

Mailing Address 8841 Montagna Dr

City

Las Vegas

State

NV

Zip Code

89134-6148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

924.00

Date of Receipt

11 / 21 / 2012

Transaction ID : 40CCB1CF68B1552E4578

Amount of Each Receipt this Period

84.00

Full Name (Last, First, Middle Initial)

c. John Jason West M.D.

Mailing Address 3322 NW Panorama Dr

City

Bend

State

OR

Zip Code

97701-5461

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bend Memorial Clinic

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

458.26

Date of Receipt

11 / 11 / 2012

Transaction ID : 4FB79E4B286349245640

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional)..... ►

209.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 56 OF 67
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steven R. West M.D., F.A.

Mailing Address 3701 S Poplar Dr

City
ColumbusState
INZip Code
47201-4972FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Vincent Medical Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2012			

Transaction ID : 4730A4A5A6686C50FC92

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

B. Michael C. Widmer M.D., F.A.

Mailing Address 2753 NE Red Oak Dr

City
BendState
ORZip Code
97701-8348FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Center Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

Transaction ID : 48B5822CF3C1C14C0268

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. Byron R. Williams Jr., M.D.,Mailing Address Medical Office Tower
5th FloorCity
AtlantaState
GAZip Code
30308FEC ID number of contributing
federal political committee.

C

Name of Employer

Emory Clinic

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2012			

Transaction ID : EDEBEDEAA5DCC94EC77

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

375.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kent D. Winkler M.D., F.A.

Mailing Address 2000 S Thompson St

City State Zip Code
Flagstaff AZ 86001-8759

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mountain Heart Medical Practice PLLC

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : E2182744B979972B4AA

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Michael J. Wolk M.D., M.A.

Mailing Address 876 Park Ave

City State Zip Code
New York NY 10075-1832

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Cardiology Associates

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2012

Transaction ID : 47EDBC40A5F6D2B8BBAE

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

c. Richard C. Wong M.D., F.A.

Mailing Address 18370 Burbank Blvd
Ste 707

City State Zip Code
Tarzana CA 91356-2830

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiology Consultants

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2012

Transaction ID : 0A3ED1D2-39C5-463B-

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

875.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard F. Wright M.D., F.A.

Mailing Address 1038 S Carmelina Ave

City

Los Angeles

State

CA

Zip Code

90049-5810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

Transaction ID : 491DAB47F2BF3F79A17F

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Lambert A. Wu M.D., F.A.

Mailing Address 1524 NW Grove Ave

City

Topeka

State

KS

Zip Code

66606-1234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cotton O'Neil Heart Center

Occupation

ECHOCARDIOLOGY/ECHOCARDIOGRAPHY

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2012			

Transaction ID : 43DA897190C5F1022BA4

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Lambert A. Wu M.D., F.A.

Mailing Address 1524 NW Grove Ave

City

Topeka

State

KS

Zip Code

66606-1234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cotton O'Neil Heart Center

Occupation

ECHOCARDIOLOGY/ECHOCARDIOGRAPHY

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			19			2012			

Transaction ID : 410B881009523CB58EA2

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

416.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Janet Fredal Wyman MSN, NP, A

Mailing Address 960 Westchester Rd

City

Grosse Pointe Park

State

MI

Zip Code

48230-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Henry Ford Hospital

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 28 / 2012

Transaction ID : 4F4EA6AE84DC670DC6EC

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
/ /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
/ /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

83.34

TOTAL This Period (last page this line number only)..... ►

35078.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American College of Cardiology - Admin Account

Mailing Address P.O. Box 85024

City
Richmond

State
VA

Zip Code
23285-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19725.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : E1E43D648E7561B8E65

Amount of Each Receipt this Period

1768.73

Reimbursement for October Amex Fees and November Merchant Fees

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1768.73

1768.73

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American College of Cardiology Political Action Committee

239.12



1529.61

1768.73

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ben Cardin for Senate

Mailing Address PO Box 21093

City	State	Zip Code
Catonsville	MD	21228

Purpose of Disbursement
2012 General

011

Candidate Name

Benjamin L. CardinCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2012

Transaction ID : 2136128D17633125A00

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Berkley for Senate

Mailing Address 7437 S Eastern Ave Suite 427

City	State	Zip Code
Las Vegas	NV	89123

Purpose of Disbursement
2012 General

011

Candidate Name

Shelley BerkleyCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NV District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2012

Transaction ID : 7CD8E0E82648C80DEEA

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Cantor for Congress

Mailing Address PO Box 17813

City	State	Zip Code
Richmond	VA	23226

Purpose of Disbursement
2012 General

011

Candidate Name

Eric Ivan CantorCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: VA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2012

Transaction ID : AFA36F0CF7F3A23976E

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Carmona for Arizona

Mailing Address PO Box 12339

City	State	Zip Code
Tucson	AZ	85732

Purpose of Disbursement
2012 General

011

Candidate Name

Richard Carmona

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: AZ District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2012

Transaction ID : F22696FDF7794AA5CCC

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Carper for Senate

Mailing Address PO Box 2882

City	State	Zip Code
Wilmington	DE	19805

Purpose of Disbursement
2012 General

011

Candidate Name

Thomas Richard Carper

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: DE District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : BB01BE54F4D20DCD30B

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Charles Boustany Jr. MD for Congress, Inc.

Mailing Address PO Box 80126

City	State	Zip Code
Lafayette	LA	70598-0126

Purpose of Disbursement
2012 Run-Off

011

Candidate Name

Charles W. Boustany Jr.

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼

State: LA District: 03

Runoff

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2012

Transaction ID : 31AF04207B6D8BF58BA

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

8500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Carolyn McCarthy

Mailing Address 151 Linden Road

City	State	Zip Code
Mineola	NY	11501

Purpose of Disbursement
2012 General

011

Candidate Name

Carolyn McCarthyCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2012

Transaction ID : 0CFDDF5672C57A119BB

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Friends of John Barrow

Mailing Address PO Box 1001

City	State	Zip Code
Augusta	GA	30903

Purpose of Disbursement
2012 General

011

Candidate Name

John Jenkins BarrowCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : 8595A29301A6B02B6C4

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. Friends of Sherrod Brown

Mailing Address PO Box 15293

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
2012 General

011

Candidate Name

Sherrod BrownCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : E5CE9C51CA0EA2B5A4A

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gillibrand for SenateMailing Address 236 Massachusetts Ave NE
Suite 110

City Washington State DC Zip Code 20002

Purpose of Disbursement
2012 General

011

Candidate Name

Kirsten Elizabeth GillibrandCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : 12C9937E7474EB6B728

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Kurt Schrader for Congress

Mailing Address PO Box 3314

City Oregon City State OR Zip Code 97045

Purpose of Disbursement
2012 General

011

Candidate Name

Kurt SchraderCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: OR District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2012

Transaction ID : A33852CE7C8CFB62A2A

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Marsha Blackburn for Congress, Inc.

Mailing Address PO Box 3750

City Brentwood State TN Zip Code 37024-3750

Purpose of Disbursement
2012 General

011

Candidate Name

Marsha BlackburnCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : BF25CDF4BDD088622A1

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pascrell for Congress

Mailing Address PO Box 640

City Totowa	State NJ	Zip Code 07511
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Purpose of Disbursement
2012 General

011

Candidate Name

William J. Pascrell Jr.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2012

Transaction ID : A4DEE26A5B3C1F9118B

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Rogers for Congress

Mailing Address PO Box 581

City Brighton	State MI	Zip Code 48116-0581
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Purpose of Disbursement
2012 General

011

Candidate Name

Mike RogersCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : 96325781DD964FA7B3F

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Tim Bishop for Congress

Mailing Address PO Box 437

City Farmingville	State NY	Zip Code 11738
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Purpose of Disbursement
2012 General

011

Candidate Name

Timothy H. BishopCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2012

Transaction ID : A1458034CF7F8FAAA2C

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tom Rice for CongressMailing Address 1107 48th Ave. N.
Suite 210

City Myrtle Beach State SC Zip Code 29577

Purpose of Disbursement
2012 General

Candidate Name

Tom RiceOffice Sought: ☒ House
☐ Senate
☐ President
State: SC District: 07Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : DCB097BF661015C7807

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Victory Now PAC

Mailing Address 10537 St. Paul St.

City Kensington State MD Zip Code 20895

Purpose of Disbursement
2012 Contribution

Candidate Name

Victory Now PACOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼ Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2012

Transaction ID : 4D82584100AFA152699

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

52500.00
